

Methamphetamine Information

Background/History

- A derivative of amphetamine that was first developed in 1919 by a pharmacologist in Japan. By 1930 methamphetamine (meth) began to be used therapeutically in treating asthma and narcolepsy. More recently the drug has been used as an appetite suppressant and to treat certain attention deficit disorders in children.
- In the United State the original manufacturers, or “cookers” , of the drug illicitly were members of motorcycle gangs.
- In recent years domestic production has been supplanted by Mexican drug cartels who have ready access to ephedrine (a key ingredient in the manufacturing process) which is not regulated in Mexico.
- As early as 1983, illicit meth production in California became a significant enough problem that law enforcement resources were allocated to specifically address meth.
- In 1992 Utah passed both the Drug Precursor Act and the Clandestine Drug Lab Act to regulate precursor chemicals used to manufacture meth.
- In 1998 Utah passed H.B. 130 Controlled Substances Precursor Amendments, which added crystal iodine as a precursor and limited possession to 2 ounces. This amendment also limited the possession of ephedrine and pseudoephedrine to 12 grams.

General

- Methamphetamine is a controlled substance that is illegal to possess, manufacture, or sell under Utah and Federal law.
- Usually not sold and bought on the streets like many other illicit drugs, but, rather involves a secreted distribution through friends, acquaintances, and networking.
- Lucrative area for distributors since it is financially inexpensive to make but is highly addictive. Currently in Utah the price of meth is \$10,000 - \$12,000 per pound, or \$1,000 - \$1,200 per ounce.
- Average profit to cost ratio is 10:1. One ounce of meth can be produced at a cost of \$100 and sold for \$1,000.
- Due to additional laws restricting access to precursor chemicals in Utah the average purity of meth dropped from 43% in 1997 to less than 27% in FY 1999.
- Utah’ s drug trafficking is currently dominated by Mexican “poly-drug” traffickers with sources of supply for meth, cocaine, heroin and marijuana. By controlling all facets of trafficking, these organizations smuggle, manufacture, transport, and distribute drugs frequently using family members to ensure loyalty to the group.

- Chemicals from meth labs seep into carpets, furniture, floors, drywall, paint, and studs, causing cancer, skin rashes, or nerve damage.
- Utah does not currently have laws defining cleanliness standards for homeowners or property managers once a meth lab has been discovered. Law enforcement removes chemicals from illegal labs but cleanup remains the responsibility of landowners, who can pay as much as \$55 per square foot of floor surface.

Consequences of Use

- Meth is cheaper than cocaine and because it is resistant to metabolism the high lasts longer. Meth use can result in an 8 to 24 *hour* high and 50% remains in the user's body 12 hours after consumption. In contrast, cocaine creates a 20 to 30 *minute* high, and 50% of the substance is removed from the body after only 1 hour.
- Tolerance to meth develops quickly and therefore users are likely to indulge in a "binge-and-crash" pattern in an attempt to maintain the original high.
- Users may initially take meth in search of feelings of euphoria, increased energy and self-confidence, and decreased appetite. However, other effects may include paranoia, depression, pupil dilation, tremors, memory loss, insomnia, irritability, a heightened sense of smell, increased sex drive, chest pain, hypothermia, hypertension, convulsions, and heart spasms.
- Long term and heavy use of meth is often associated with addiction and tendencies toward violence. Abusers often experience delusions, anxiety, confusion, extreme paranoia, drastic mood swings, weight loss, homicidal and suicidal thoughts, and visual and auditory hallucinations.
- Prolonged use may lead to brain damage or death. Animal studies indicate that a single high dose of meth can cause nerve damage and that prolonged exposure to low levels can cause damage to 50% of the dopamine producing cells in the brain. One animal study indicated that full recovery of dopamine production took almost 2 years following a 10 day regimen of meth.
- Infants and Children. One Swedish study, which followed children exposed prenatally to amphetamines for 16 years, found that, although they scored in the normal range on IQ tests, by the age of 7 or 8, they exhibited higher levels of aggressive behavior, had greater difficulty adjusting to different environments, and had higher rates of school failure than other children.
- In an August 3, 2000 *Deseret News* article, Lisa Jorgensen, a Utah social worker, described the condition of one of her 5 year old clients.

"After two years of using, her male client has lost most of his ability to complete basic daily tasks. He exhibits violent tendencies and is antisocial, believing that societal rules don't really apply to him. Physically, he suffers heart problems and hearing loss from the drug (meth) use. He is off the drug now but continues to exhibit all the classic signs of withdrawal. His whole life has revolved around meth, as has that of his family, most of whom are doing time in the state prison."

Consequences of Production

- A number of highly volatile chemicals are used during the production of meth that pose a potential risk for contamination, fire and explosion.
 1. Phosphine gas - which is highly unstable and poisonous is generated when ephedrine, hydriodic acid, and red phosphorus are cooked dry.
 2. Hydriodic acids at full strength will eat through most commercial containers.
 3. Red phosphorous - emits toxic fumes, is highly flammable, and will auto-ignite when combined with water or air and a nearby flame or friction.
- Clan labs are ordinarily accompanied by firearms, booby-traps, and heightened surveillance.
- Often manufactured residentially and includes families with minors and small children. Parents using meth neglect children and their cycle of abuse causes a loss of the ability to respond to the child's needs for food, shelter, sleep, medical attention and supervision from harm.
- Risky misperception that meth cannot be too dangerous since components to manufacture it are legally obtained. (Dry gas, Red Devil Lye, ephedrine, etc.)
- Popular laboratory sites (meth labs) continue to be motel rooms, storage sheds, motor homes, mobile homes, and single family dwellings. Most meth labs are small and easily transported in vehicles from site to site leaving toxic residue and chemical waste behind.
- The average cost for law enforcement to process one meth lab is between \$3,000 to \$5,000. During FFY 99, cleanup costs totaled \$946,000.

Prevalence

- Meth offenses have been multiplying over the past few years. Nationwide DEA seizures of meth labs rose 640% in the last 5 years. In 1999 alone, DEA seized 1,948 labs and state and local law enforcement nationwide seized an additional 4,489.
- 266 meth labs were seized and removed in Utah during 1999 compared to only 10 in 1994, 30 in 1995, 61 in 1996, 129 in 1997, 240 in 1998.
- Meth use in Utah is extraordinarily high. Utah's admission rate for meth treatment is almost three times the national average at 82 per 100,000 population in Utah versus 29 per 100,000 population for the nation.
- Meth use among Utah's female population has increases dramatically from 16.3% in 1997 to 22.8% in 1998. This increase makes meth the second most prevalent drug of abuse among females in Utah.

- Because females tend to wait longer before entering treatment, their addiction has progressed to the point they require longer lengths of stay and a number of different resources available after treatment.
- 9.1% of all high school students in the U.S. reported having used meth at least once in their lifetime (including 7.3% of Utah high school students).
- Salt Lake City ranks third in the U.S. for number of arrestees using meth. Meth was the third drug of choice for men behind marijuana and cocaine. It was the number one drug of choice for women arrestees.
- Salt Lake District Attorney' s Office filed 8,600 felony charges last year, approximately 70% were for controlled substances, 32% of which were for meth offenses. This rate has been doubling every 5 years.
- 47.4% of all referrals for substance abuse treatment in Utah are generated by the criminal justice system. This clientele provides unique challenges as they generally require longer treatment durations and are usually using more than one drug.
- Substance Abuse **Treatment Admissions** from 1992 thru 1999.

Drug	1992	1993	1994	1995	1996	1997	1998	1999
Alcohol	12,472	10,792	12,178	9,343	8,906	7,609	7,094	7,524
Cocaine/Crack	985	1,186	1,773	1,843	1,806	2,238	1,657	1,529
Marijuana/Hashish	695	1,160	1,566	1,800	2,442	2,705	2,924	3,321
Heroin	317	346	640	867	1,103	1,524	1,298	1,438
Methamphetamine	63	132	346	1,344	1,538	1,992	2,702	2,882
Meth as % of Ttl:	0.4%	1.0%	2.1%	8.8%	9.7%	12.4%	17.2%	17.3%

- Over 50% of all meth users begin their habit between the age of 12 and 19.

Age of **First Use** of Methamphetamine in Utah (FY 1991 to FY 1999)

Age Group	Number	Percent
Under 7	97	1%
8 to 11	183	2%
12 to 15	2,229	21%
16 to 19	3,199	30%
20 to 23	1,861	18%
24 to 27	1,279	12%
28 to 31	899	8%
32 to 35	499	5%
36 to 39	229	2%
40 to 43	75	1%
44 +	41	<0%

- Utah State Prison inmates participating in substance abuse treatment programs report meth as their **most common** substance of abuse.

UDC - Primary Substance of Abuse

Meth	Alcohol	Cocaine/ Crack	Marijuana/ Hashish	Heroin	Other Opiates	Other Drugs
32.9%	21.7%	19.7%	13.2%	9.7%	1.7%	1.0%

Sources:

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